

# Sumter County Health Department

&

## Wildwood Grower's Market



**3.16 Mile Run/Walk:**

Wildwood City Hall

**Race Day Registration:**

**April 16, 2011**

Check in Begins at 6:30AM

**For more info call:**

352-793-2701 ext 223

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

*Step Up To  
Women's Health!!  
5K Run/Walk*

### Release and Waiver of Liability

1. Release, Waive, Forever Discharge, Hold Harmless, and Covenant To Sue The Sumter County Health Department any sponsor, advertiser and promoter of this event, and any owner or lessee of the premises used to conduct or hold the event and each of them, the or officers, directors, members, executives, agents, affiliates, department representatives, successors and assigns (collectively and Individually the "Release) of all liability to me and my executors, administrators, personal representatives, assigns, heirs, and next of kin, for any loss or damage, and all claims or demands therefore, on account of injury to my person or property or resulting in my death, arising out of any way connected with my participation or involvement in or presence at this Event, suffered before, during or after the Event, whether caused by negligence, action or inaction of Release or otherwise;
2. Indemnify and Hold Harmless Release from and against any loss, liability, damage or cost that I may incur due to participation, involvement or presence of this Event, whether caused by negligence, action or inaction of Release or otherwise;
3. Assume Full Responsibility For and Risk of Bodily Injury, Death or Property Damage arising out of or in any way connected with the participation, involvement in or presence by me at this Event suffered before, during or after the Event, whether caused by the negligence, action or inaction of Release or otherwise. I understand that participation, involvement or presence at this Event carries the risk of injury or death or property damage and I accept that risk freely and voluntarily;
4. Agree that the foregoing release, waiver and indemnity agreement is intended to be as broad and inclusive as is permitted by Florida law, and that if any portion is held invalid for any reason, the balance should not withstanding, continue in full legal force and effect;
5. Agree that the foregoing agreement is intended to apply to any participation or involvement in or presence at this Event by me which are sponsored, promoted held or conducted by Release until such time I deliver written revocation of this agreement to the Sumter County Health Department. No representation or inducements apart from the foregoing have been made by the Release;
6. Participant will enter the event where participant may be photographed/recorded and by entering the event, participant irrevocably consents to being photographed/recorded and grants the Sumter County Health Department assigns the licenses the right in perpetuity to distribute the results of such photographs/recordings in all media throughout the world.

I have read the following agreement in it's entirety and I hereby freely and voluntarily sign this agreement, intending to be bound thereby.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date